



**Bi-Weekly Health, Dental & Vision Insurance Premiums  
Effective July 1, 2020-June 30, 2021**

<b>HEALTH PLANS--Cigna</b>	<b>Employee Bi-weekly Cost</b>	<b>City Bi-weekly Cost</b>
<b><u>Open Access Plus In-Network (OAPIN)</u></b>		
Employee Only	\$116.57	\$343.73
Employee + One	\$241.39	\$718.16
Family	\$282.23	\$840.71
<b><u>Open Access Plus (OAP)</u></b>		
Employee Only	\$121.75	\$359.25
Employee + One	\$250.12	\$744.38
Family	\$292.44	\$871.31
<b><u>Open Access Plus High Deductible Health Plan/Health Savings Account (HDHP/HSA)</u></b>		
Employee Only	\$90.67	\$266.01
Employee + One	\$187.32	\$555.96
Family	\$218.98	\$650.93
<b>DENTAL PLANS--Cigna</b>	<b>Employee Bi-weekly Cost</b>	
<b><u>DHMO DENTAL</u></b>		
Employee Only	\$6.35	
Employee + One	\$15.75	
Family	\$21.45	
<b><u>DPPO DENTAL</u></b>		
Employee Only	\$14.70	
Employee + One	\$36.49	
Family	\$49.70	
<b>VISION PLANS--EyeMed</b>	<b>Employee Bi-weekly Cost</b>	
<b><u>Standard Plan</u></b>		
Employee Only	\$2.88	
Employee + One	\$5.78	
Employee + Child(ren)	\$6.19	
Family	\$9.88	
<b><u>Premier Plan</u></b>		
Employee Only	\$4.10	
Employee + One	\$8.21	
Employee + Child(ren)	\$8.78	
Family	\$14.03	